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{ REPORT
No. 664

MRS. TJITSKE BANDSTRA VAN DER VELDE

AUGUST 20 (legislative day, AUGUST 1), 1951.—Ordered to be printed

Mr. McCARRAN, from the Committee on the Judiciary, submitted the following

REPORT

[To accompany H. R. 627]

The Committee on the Judiciary, to which was referred the bill (H. R. 627) for the relief of Mrs. Tjitske Bandstra van der Velde, having considered the same, reports favorably thereon without amendment and recommends that the bill do pass.

PURPOSE OF THE BILL

The purpose of the bill is to grant a waiver of existing law relating to inadmissibility of immigrants who have previously suffered some mental disability, in behalf of Mrs. Tjitske Bandstra van der Velde, who is the wife of a citizen of the United States.

STATEMENT OF FACTS

The beneficiary of the bill is a native and citizen of the Netherlands and is the wife of Mr. John van der Velde, a citizen of the United States. It appears that following the tragic deaths of two of their minor children Mrs. van der Velde suffered a mental breakdown and was confined to a mental institution from 1930 to 1938 when she was released as cured. There are two surviving children residing with Mr. van der Velde in Cambria, Wis. Without the waiver provided for in this bill Mrs. van der Velde will be unable to join her citizen husband and children in the United States.

Congressman Glenn R. Davis, the author of the bill, appeared before a subcommittee of the Committee on the Judiciary of the House of Representatives and submitted the following statement:

STATEMENT IN SUPPORT OF H. R. 627

I appreciate your courtesy in permitting me to appear here in support of my private bill H. R. 627 to authorize the admission of Mrs. John van der Velde to the United States for permanent residence.

This case first came to my attention in the summer of 1947. In September 1947, I learned from the Chief of the Visa Division of the Department of State that Mrs. van der Velde received approval of her nonquota petition in 1946. A second petition was filed in April 1947, but was rescinded when it was found that the first petition was outstanding. As shown by the letter of September 3, 1947, from the Chief of the Visa Division, Mrs. van der Velde is at present the beneficiary of a petition which accords her a status exempt from quota restrictions. She has been refused an immigration visa for the reason that the medical officer of the United States Public Health Service certified that she had a history of previous attacks of insanity. The Chief of the Visa Division states that a person with such a history is mandatorily excludable under existing law.

I would like to acquaint the members of your committee with the circumstances of this case. Up until the late 1920's Mrs. van der Velde was a normal, healthy woman, living with her husband and children in the Netherlands. I now quote from a letter dated March 22, 1948, which I received from her husband, John van der Velde, who, with two surviving children of Mr. and Mrs. van der Velde, is now a resident and citizen of Cambria, Columbia County, Wis., in the district I represent:

"My wife was in the best of health until the tragic death of our two small children. The first occurred while my wife was washing clothes and the little boy fell in a tub of boiling water, for which she blamed herself. It bothered her quite a bit. The second occurred when another little boy swallowed a piece of copper money, which caused poisoning and death. All this was pretty hard to take and was the cause of her insanity.

"She was committed to the asylum at Franeker on September 2, 1930, and released from the afore-mentioned institution on January 24, 1938. Since that time she has been working as housekeeper for 1 year at one place and for 9 years at the place she now resides, and is in the best of health."

I would like to submit for the committee records a statement signed by Dr. J. C. van Andel, medical director of the Franeker Psychiatric Institution, which reads as follows:

"The undersigned, J. C. van Andel, medical director of the Psychiatric Institution at Franeker, declares that Tjitske Bandstra was treated in the aforesaid institution from September 2, 1930, to January 24, 1938, and on the latter date was released as cured, and since then has not shown any mental disturbances and is fully able to take care of herself in society."

I also wish to submit for your committee records (with the request that all of these statements may be returned to me after the committee has had an opportunity to examine them) statements by Mr. and Mrs. George Eisenga of Route 2, Randolph, Wis.; Mr. Henry Woudstra, Route 2, Randolph, Wis.; Mr. Peter Dykstra, Route 1, Cambria, Wis.; and of Martin and Paul van der Velde, of Friesland, Wis. These are all people who have seen Mrs. van der Velde face to face at various times between October 23, 1946, and January 1, 1948. All of these people in their statements express the opinion that Mrs. van der Velde is in sound mental and physical condition.

I therefore request your earnest consideration of this bill, which would permit Mrs. van der Velde to join her husband and children as a permanent resident of this country. Her husband, John van der Velde, is a substantial and respected citizen of his community. There need be no cause for fear that Mrs. van der Velde would become a public charge, and I believe the evidence is ample to show that there need be no cause of concern regarding a recurrence of her past mental disturbance.

I thank you for your attention and will be happy to attempt to answer any questions you may ask.

In addition, Congressman Davis submitted the following letter from the Chief of the Visa Division of the Department of State in connection with the case:

SEPTEMBER 3, 1947.

HON. GLENN R. DAVIS,
House of Representatives.

MY DEAR MR. DAVIS: Mr. Clattenburg, of the Division of Protective Services, has informed me concerning the telephone conversation which he recently had with Mrs. Kaiser of your office in regard to the case of Mrs. Tjitske Bandstra van der Velde, the wife of Mr. John van der Velde, of Cambria, Wis.

The records of the Department show that approved nonquota petition No. V-332857 in favor of Mrs. van der Velde was received from the Department of Justice on January 4, 1946, and was forwarded to the appropriate American consul in the Netherlands. A second petition, No. V-365823, was received on April 8, 1947, and was also forwarded to the consulate. However, when it was subsequently brought to the attention of the Department by the consul at Rotterdam that the earlier petition was still outstanding, the matter was referred to the Immigration and Naturalization Service of the Department of Justice, which rescinded the second petition.

From the foregoing, it will be noted that Mrs. van der Velde is at present the beneficiary of a petition which accords her a status exempt from quota restrictions. However, it does not relieve her of the necessity of complying with the other requirements of the laws and regulations governing the entry of aliens into the United States.

The consul at Rotterdam has reported that Mrs. van der Velde was refused an immigration visa on January 6, 1947, for the reason that the medical officer of the United States Public Health Service assigned to that office certified that she had a history of previous attacks of insanity. With such a history, she is mandatorily excludable from admission into the United States under section 3 of the Immigration Act of February 5, 1917. Section 2 (f) of the Immigration Act of 1924, as amended, requires consuls to refuse visas to aliens who they know or have reason to believe are inadmissible to the United States under any of the provisions of the immigration laws.

Sincerely yours,

G. J. HAERING, *Chief, Visa Division.*

Senator Alexander Wiley has introduced in the Senate a bill (S. 1072) for the relief of the same alien. In view of the fact that the committee is reporting on the instant bill favorably, the bill, S. 1072, will be indefinitely postponed.

The committee, after consideration of all the facts in the case, is of the opinion that the bill (H. R. 627) should be enacted.

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